Denied as moot. SO ORDERED. Dated: 3/1/2024

Mevin Castel

P. Kevin Castel United States District Judge

221 OCT -5 PH 1: 20

UNITED STATES DISTRICT COURT SOUTHERN DISTRICT OF NEW YORK

SOUTHERN DISTRICT OF NEW YORK
Tara Bafra - Louis (List the full name(s) of the plaintiff(s)/petitioner(s).) -against- Royal Brough Kan Chelsea Request Pro Bono Counsel
(List the full name(s) of the defendant(s)/respondent(s).)
I ask the Court to request a pro bono attorney to represent me in this action. In support of my application, I declare under penalty of perjury that the following information is true and correct: 1. Have you previously filed a "Request to Proceed in Forma Pauperis" (an IFP application)? Please check the appropriate box below:
I have previously filed an IFP application in this case, and it is a true and correct representation of my current financial status.
I have not previously filed an IFP application in this case and now attach an original IFP application showing my financial status.
I have previously filed an IFP application in this case, but my financial status has changed. I have attached a new IFP application showing my current financial status.
2. Explain why you need an attorney in this case. (Please note that requests for pro bono counsel are rarely granted at the early stages of a case and usually not before the Court has issued a decision on the merits of the case.) If you asked for an attorney earlier in this case, please also explain what has changed since you last asked for an attorney.
My infant could be removed without a carer. My juyear old
without a carer. My ju year old
has nobody apart from myse if to
look after him I have no tinds
I am a slave as a court know
falting the will an a proket
fighting the VIC gov. w/ deep pockets.
Rev. 3/27/14 Please help my family

Filed 108/05/23 Page 2 of 2 food 5 tumps HRA Medicult and None 15 5 5 5 5 3. Explain what steps you have taken to find an attorney and with what results. (Please identify the lawyers, law firms or legal clinics you have contacted and their responses to your requests. If you have limited access to the telephone, mail, or other communication methods or if you otherwise have had difficulty contacting attorneys, please explain.) That attended performs the communication methods ain.)
and asked a number of law firm
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4. If you need an attorney who speaks a language other than English, state speak: \(\frac{\hat{\gamma}}{a} \) _ \(\frac{a}{a} \)
5. I understand that if an attorney volunteers to represent me and that attorney learns that I can afford to pay for an attorney, the attorney may give this information to the Court.
6. I understand that even if the Court grants this application, I will receive pro bono counsel only if an attorney volunteers to take my case and that there is no guarantee that an attorney will volunteer to represent me.
7. I understand that if my answers on this application or in my IFP application are false, my case may be dismissed.
Date Signature
Tora Batha-Lais
Name (Last, First, MI) 20 T 7 TH NY Address City Prison Identification # (if incarcerated) NY 10021 Zip Code
Telephone Number E-mail Address (if available)
gmail. com
gmay1. com